## 

Fill	in this information to identify your ca	ase:								
	otor 1 James J. Ac									
5.2	btor 2 buse, if filing)				_					
Uni	ited States Bankruptcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA	<b>\</b> <sub>0</sub>						
	se number 		-		0	heck if this is:  An amende  A supplement	-	ing postpetition o	:hapter	
0	fficial Forms 4001							following date:		
Official Form 106I						MM / DD/ YYYY				
	chedule I: Your Income complete and accurate as poss								12/15	
sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  t 1: Describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	spouse de infor	is living v mation al	vith you, inclu oout your spo	ide info use. If r	rmation about y	our eeded,	
1.	Fill in your employment information.	Debtor 1			Debtor 2	Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			Emplo	■ Employed			
			☐ Not employed			☐ Not er	☐ Not employed			
		Occupation	Carpenter Heartwood Building Group			Part Tin	Part Time Waitress			
	Include part-time, seasonal, or self-employed work.	Employer's name				Planet I	Planet Hoagies			
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed to	here? 5 month	าร						
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	port for	any line, v	write \$0 in the	space. I	nclude your non-	filing	
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	employers	for that perso	n on the	lines below. If yo	ou need	
					For	Debtor 1		ebtor 2 or iling spouse		
2.	List monthly gross wages, salar deductions). If not paid monthly, or	ry, and commissions (be calculate what the monthly	efore all payroll y wage would be.	2.	\$	6,548.00	\$	1,881.00		
3.	Estimate and list monthly overti	ime pay.		3.	+\$	0.00	+\$_	0.00		
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	6,548.00	\$_	1,881.00		

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	James J. Aquilino	2	Case	number (if known)				
	Cop	y line 4 here	4.	For	Debtor 1 6,548.00		Debtor 2 or filling spouse		
-			7.	Ψ	6,546.00	Ψ	1,001.00		
5.		all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,174.00	\$	298.00		
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00		
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00		
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d.	\$	0.00	\$	0.00		
	5f.	Domestic support obligations	5e. 5f.	\$_ s	0.00	\$	0.00		
	5g.	Union dues	51. 5g.	\$ _	0.00	\$	0.00		
	5h.	Other deductions. Specify:	5h.+		0.00	- \$	0.00		
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	<b>-</b> >),	<u> </u>		*. <del></del>	0.00		
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	6. 7.	\$ <u> </u>	1,174.00	\$	298.00		
			1.	\$	5,374.00	\$	1,583.00		
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total most business.	0-		E (4.74)				
	8b.	monthly net income. Interest and dividends	8a.	<u>\$</u> _	0.00	\$	0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8b.	<b>\$</b>	0.00	\$	0.00		
		settlement, and property settlement.	8c.	\$	0.00	\$	0.00		
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00		
	8e.	Social Security	8e.	\$	0.00	\$	0.00		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	0.00		
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00		
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	- \$	0.00		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00		
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		5,374.00 + \$	1.59	33.00 = \$ 6	,957.00	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,50	13.00	,337.00	
		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						,957.00	
13.	Do y	ou expect an increase or decrease within the year after you file this form?	?				Combined monthly i		
		Yes, Explain:							